Family Welfere Programme in Tamil Nade

223. SHRI R. T. GOPALAN : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) the target fixed for the Family Welfare Programme in Tamil Nadu during the last five years and the districtwise achievement made thereof; and

(b) the total financial assistance provided to the State under this programme during the said period and the districtwise percentage utilization thereof ?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARADEVI SIDDHARTHA) : (a) and (b) The information is being collected from the Government of Tamil Nadu and will be laid on the Table of the House.

Intensive Health Care Programme

224. SHRI R. T. GOPALAN: Will the Minister of HEALTH AND FA MILY WELFARE be pleased to state:

(a) whether there is any proposal under Government's consideration to undertake an Intensive Health Care Programme in selected districts in the country; and

(b) if so, the details thereof State-wise?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D.K. THARADEVI SIDDHARTHA):
(a)and(b) No Sir. The District Health Care Services are the responsibilities of the State Governments under the Constitution. However, all the National Health Programmes to control/ eradicate diseases like Malaria, Leprosy, TB, Cancer and Blindness are being implemented upto the grassroot level throughout the country through the State Health infrastructure. Most of these programmes from District to the grassroot are integrated with the general health services and the District Medical Officer is the Chief Implemen-tiag Authority at the District level.

Availability of Doctors in Indigenous Systems of Medicine

225. SHRI RAMACHANDRAN PILLAI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the number of qualified Doctors available in each State/Union territory in Asawwda/Homoeopathy/Unani/Na-turopathy and Modern medicine system-wise; and

(b) the ratio of physician vis-a-vis population in each State/Union Territory system-wise?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D.K. THARADEVI SIDDHARTHA))
(a) A statement giving Statewise, qualified doctors available in Ayurveda/ Homoeo/Unani/Naturopathy and Modem medicine is given at Annexure. *[See* Appendix CLXII, Annexure No. 5]

(b) A statement giving ratio of Physician vis-a-vis population in each State/ Union Territory system-wise is given at Annexure. *[See* Appendix CLXII, Annexure No. 6]

Raids By Food Inspectors

226. SHRI GHUFRAN AZAM: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to refer to answer to Unstarred Question 2829 given in the Rajya Sabha on 18th December, 1991 and state:

(a) whether it is a fact that the Enforcement Branch of the Department of Prevention of Food Adulteration, Delhi Administration, Delhi has maintained a sample register wherein daily entries are made with regard to samples lifted by individual Food Inspectors;

(b) whether it is also a fact that the Enforcement Branch has also maintained the daily proformas/record containing orders of Director (PFA) wherein the names of Food Inspectors are entered who are detailed for conducting the raid; and

(c) if so, the number of raids conducted and the number of samples lifted by individual Food Inspectors of Department of Prevention of Food Adulteration, Delhi Administration, Delhi Inspector-wise from June 1990 to May 1991?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARADEVI SIDDHARTHA):
(a) to (c) As per the information furnished by the Delhi Administration, the Department of Prevention of Food Adulteration, maintain sample register wherein the details of samples lifted and their results are recorded. Records containing orders of Director (PFA) for conducting inspections by the Food Inspectors and reports received from the Local (Health) Authorities are also

maintained. The number of samples lifted by each Food Inspector from June 1990 to May 1991 is at Annexure.

भारत में "एड्स"

227. श्री राघवजी: क्या स्वास्थ्य और परिवार कल्याण मंत्री यह बताने की कृपा करेंगे कि :

(क) 31 दिसम्बर, 1991 की स्थिति के अनुसार, देश में कुल कितने व्यक्ति "एड्स" रोग से ग्रसित थे; और

(ख) देश में इस रोग को फैलने से रोकने के लिए क्या कदम उठाए जा रहे हैं ?

स्वास्थ्य और परिवार कल्याण मंत्रालय में राज्य मंत्री (श्रीमती डी० के० तारादेवी सिद्धार्थ): (क) 31 दिसम्बर, 1991 को एच० आई० वी० संक्रमण के लिए खतरे के आचरण वाले व्यक्तियों से 12,27,387 रक्त के नमूने लेकर उनकी जांच की गई जिनमें से 6414 व्यक्ति सीसे-पॉजिटिव पाये गए हैं । 6414 एच०आई० वी० पॉजिटिव रोगियों में से 103 व्यक्तियों में एड्स रोग पूर्ण रूप से विकिसित हो गया था ।

(ख) एड्स की रोकथाम और नियंत्रण के लिए राष्ट्रीय एड्स नियंत्रण कार्यक्रम 1987 में शुरु किया गया । अब तक शुरू किए गए कार्यकलापों में निम्नलिखित कार्यकलाप शामिल हैं :—

—ऊंचे खतरे के आचरण वाले वर्गों में व्यापकता दर और संक्रमणात्मक प्रवृत्तियों का निर्धारण करने के लिए एक निगरानी पद्धति की व्यवस्था करना । आंचलिक आधार पर रक्त बैंकों में रक्त की जांच करने के लिए परीक्षण सुविधाओं की स्थापना करके रक्त और रक्त उत्पादों की सुरक्षा को बढ़ावा देना ।

—स्वास्थ्य शिक्षा ।

—अस्पताल के संक्रमण की रोकथाम के लिए दिशानिर्देश तैयार करना ।

—13 क्षेत्रीय अस्पतालों और एच० आई० वी० से संक्रमित रोगियों के निदान और उपचार में क्लीनिकीविदों और अर्ध-चिकित्सा कर्मचारियों के प्रशिक्षण को सुदृढ़ बनाना ।

—उन राज्यों/संघ राज्य क्षेत्रों में केन्द्रित कार्यकलाप योजनाओं को कार्यान्वित करना जहां निगरानी के आधार पर साक्षेप रूप से अधिक संख्या में एच० आई० वी० से संक्रमित व्यक्तियों का पता लगाया गया हो ।

अप्रैल, 1990 से शुरू होकर 50 वर्षों की अवधि के लिए राष्ट्रीय एड्स परियोजना को धन प्रदान करने के लिए विश्व बैंक के साथ हाल ही में 100 मिलियन अमरीकी डालर (270 करोड़ रुपये) के परिव्यय वाली परियोजना के बारे में बातचीत पूरी कर ली गई है । इस परियोजना के अन्तर्गत रोकथाम और नियंत्रण संबंधी कार्याकलाप देश-भर में कार्यान्वित किए जाएंगे ।

Non-Availability of Life Saving Drugs

228. SHRI TINDIVANAM G. VENKATRAMAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Governments are aware of the fact that the life saving drugs are normally not available in Government Hospitals and the patients are asked to buy the same from the market;

(b) if so, what are the reasons for not supplying such medicines to patients;

(c) what is the proposal of Government to solve the "helpaged" menance in our country;

(d) the number of Government institutions are there in the country to "helpaged"; and

(e) if not, whether there is any proposal to establish such institutions during the year 1992?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARADEVI SIDDHARTHA): (a) Life saving drugs are normally available in Government Hospitals and are supplied free of cost to all the patients, excepting tie non-entitled patients.

(b) Does not arise.